

IN THE UNITED STATES BANKRUPTCY COURT  
WESTERN DISTRICT OF PENNSYLVANIA

In re:	)	
	)	
WILLIAM A. EMERICK,	)	Case No: 21-21263-JAD
	)	
Debtors.	)	Chapter 7
	)	
WILLIAM A. EMERICK,	)	Doc. No. 14
	)	
Movants,	)	Response Deadline: 07/19/2018
	)	
v.	)	
	)	
NO RESPONDENT.	)	

**AMENDMENT COVER SHEET**

Amendment(s) to the following petition, list(s), schedule(s), or statement(s) are transmitted herewith:

\_\_\_\_\_ Voluntary Petition - *Specify reason for amendment:*

Official Form 6 Schedules (Itemization of Changes Must Be Specified)

\_\_\_\_\_ Summary of Schedules

\_\_\_\_\_ Schedule A - Real Property

\_\_\_\_\_ Schedule B - Personal Property

\_\_\_\_\_ Schedule C - Property Claimed as Exempt

\_\_\_\_\_ Schedule D - Creditors holding Secured Claims

Check one:

\_\_\_\_\_ Creditor(s) added

\_\_\_\_\_ NO creditor(s) added

\_\_\_\_\_ Creditor(s) deleted

  X   Schedule E - Creditors Holding Unsecured Priority Claims

Check one:

  X   Creditor(s) added

\_\_\_\_\_ NO creditor(s) added

\_\_\_\_\_ Creditor(s) deleted

\_\_\_\_\_ Schedule F - Creditors Holding Unsecured Nonpriority Claims

Check one:

\_\_\_\_\_ Creditor(s) added

\_\_\_\_\_ NO creditor(s) added

\_\_\_\_\_ Creditor(s) deleted

\_\_\_\_\_ Schedule G - Executory Contracts and Unexpired Leases

Check one:

\_\_\_\_\_ Creditor(s) added

\_\_\_\_\_ NO creditor(s) added

\_\_\_\_\_ Creditor(s) deleted

\_\_\_\_\_ Schedule H - Codebtors

\_\_\_\_\_ Schedule I - Current Income of Individual Debtor(s)

\_\_\_\_\_ Schedule J - Current Expenditures of Individual Debtor(s)

\_\_\_\_\_ Statement of Financial Affairs

\_\_\_\_\_ Chapter 7 Individual Debtor's Statement of Intention

\_\_\_\_\_ Chapter 11 List of Equity Security Holders

\_\_\_\_\_ Chapter 11 List of Creditors Holding 20 Largest Unsecured Claims  
\_\_\_\_\_ Disclosure of Compensation of Attorney for Debtor  
\_\_\_\_\_ Other: \_\_\_\_\_

**NOTICE OF AMENDMENT(S) TO AFFECTED PARTIES**

Pursuant to Fed.R.Bankr.P. 1009(a) and Local Bankruptcy Rule 1009-1, I certify that notice of the filing of the amendment(s) checked above has been given this date to the U.S. Trustee, the trustee in this case, and to entities affected by the amendment as listed on the attached Certificate of Service.

Date: June 18, 2021

/s/ Dai Rosenblum, Esq.  
Dai Rosenblum, Esquire  
Suite B, 254 New Castle Road  
Butler, PA 16001-2529  
724-283-2900 Pa. ID# 31802  
dai@dairosenblumbankruptcy.com

**Fill in this information to identify your case:**

Debtor 1 **William A. Emerick**  
 First Name Middle Name Last Name

Debtor 2  
 (Spouse if, filing) First Name Middle Name Last Name

United States Bankruptcy Court for the: **WESTERN DISTRICT OF PENNSYLVANIA**

Case number **21-21263**  
 (if known)

☒ Check if this is an amended filing

**Official Form 106E/F**

**Schedule E/F: Creditors Who Have Unsecured Claims**

**12/15**

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Have Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. If you have no information to report in a Part, do not file that Part. On the top of any additional pages, write your name and case number (if known).

**Part 1: List All of Your PRIORITY Unsecured Claims**

1. Do any creditors have priority unsecured claims against you?

☐ No. Go to Part 2.

☒ Yes.

2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.

(For an explanation of each type of claim, see the instructions for this form in the instruction booklet.)

		Total claim	Priority amount	Nonpriority amount
2.1	<b>Dawn Emerick</b> Priority Creditor's Name <b>111 Jessie St.</b> <b>Ellwood City, PA 16117</b> Number Street City State Zip Code	<b>2018</b> Last 4 digits of account number	<b>\$1.00</b>	<b>\$1.00</b>
	Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	When was the debt incurred?  As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of PRIORITY unsecured claim: <input checked="" type="checkbox"/> Domestic support obligations <input type="checkbox"/> Taxes and certain other debts you owe the government <input type="checkbox"/> Claims for death or personal injury while you were intoxicated <input type="checkbox"/> Other. Specify	<b>\$0.00</b>	

**Wage attachment in place. Debtor is current.**

**Part 2: List All of Your NONPRIORITY Unsecured Claims**

3. Do any creditors have nonpriority unsecured claims against you?

☐ No. You have nothing to report in this part. Submit this form to the court with your other schedules.

☒ Yes.

4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2.

**Total claim**

Debtor 1 **William A. Emerick**

Case number (if known)

**21-21263**

4.1

**AT&T Mobility**

Nonpriority Creditor's Name

**P.O. Box 6416**

**Carol Stream, IL 60197-6416**

Number Street City State Zip Code

Who incurred the debt? Check one.

- ☒ Debtor 1 only
- ☐ Debtor 2 only
- ☐ Debtor 1 and Debtor 2 only
- ☐ At least one of the debtors and another
- ☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
- ☐ Yes

Last 4 digits of account number **6952**

**\$769.63**

When was the debt incurred? **2020**

As of the date you file, the claim is: Check all that apply

- ☐ Contingent
- ☐ Unliquidated
- ☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
- ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
- ☐ Debts to pension or profit-sharing plans, and other similar debts

☒ Other. Specify **Cell Phone Service**

4.2

**Butler Medical Providers**

Nonpriority Creditor's Name

**Physician Division**

**P.O. Box 1549**

**Butler, PA 16003**

Number Street City State Zip Code

Who incurred the debt? Check one.

- ☒ Debtor 1 only
- ☐ Debtor 2 only
- ☐ Debtor 1 and Debtor 2 only
- ☐ At least one of the debtors and another
- ☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
- ☐ Yes

Last 4 digits of account number **4151**

**\$40.00**

When was the debt incurred? **2020**

As of the date you file, the claim is: Check all that apply

- ☐ Contingent
- ☐ Unliquidated
- ☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
- ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
- ☐ Debts to pension or profit-sharing plans, and other similar debts

☒ Other. Specify **Medical Services**

4.3

**Dawn Emerick**

Nonpriority Creditor's Name

**111 Jessie Street**

**Ellwood City, PA 16117**

Number Street City State Zip Code

Who incurred the debt? Check one.

- ☒ Debtor 1 only
- ☐ Debtor 2 only
- ☐ Debtor 1 and Debtor 2 only
- ☐ At least one of the debtors and another
- ☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
- ☐ Yes

Last 4 digits of account number

**\$65,901.45**

When was the debt incurred? **2011**

As of the date you file, the claim is: Check all that apply

- ☐ Contingent
- ☐ Unliquidated
- ☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
- ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
- ☐ Debts to pension or profit-sharing plans, and other similar debts

☒ Other. Specify **Co-debtor on mortgage loan for 111 Jessie Street, Ellwood City, PA 16117**

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4.4

**LabCorp**

Nonpriority Creditor's Name

**P.O. Box 2240**

**Burlington, NC 27216-2240**

Number Street City State Zip Code

Who incurred the debt? Check one.

☒ Debtor 1 only

☐ Debtor 2 only

☐ Debtor 1 and Debtor 2 only

☐ At least one of the debtors and another

☐ Check if this claim is for a community debt

Is the claim subject to offset?

☒ No

☐ Yes

Last 4 digits of account number **1335**

**\$22.77**

When was the debt incurred? **February 2021**

As of the date you file, the claim is: Check all that apply

☐ Contingent

☐ Unliquidated

☐ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans

☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims

☐ Debts to pension or profit-sharing plans, and other similar debts

☒ Other. Specify **Medical Services**

4.5

**T-Mobile**

Nonpriority Creditor's Name

**Bankruptcy Team**

**PO Box 53410**

**Bellevue, WA 98015**

Number Street City State Zip Code

Who incurred the debt? Check one.

☒ Debtor 1 only

☐ Debtor 2 only

☐ Debtor 1 and Debtor 2 only

☐ At least one of the debtors and another

☐ Check if this claim is for a community debt

Is the claim subject to offset?

☒ No

☐ Yes

Last 4 digits of account number **2601**

**\$208.11**

When was the debt incurred? **2020**

As of the date you file, the claim is: Check all that apply

☐ Contingent

☐ Unliquidated

☐ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans

☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims

☐ Debts to pension or profit-sharing plans, and other similar debts

☒ Other. Specify **Cell Phone Service**

**Part 3: List Others to Be Notified About a Debt That You Already Listed**

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Name and Address

**Convergent Outsourcing, Inc.**

**800 SW 39th Street**

**Suite 100**

**Renton, WA 98057**

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.5** of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number **5511**

Name and Address

**ERC**

**P.O. Box 23870**

**Jacksonville, FL 32241-3870**

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.1** of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number **6170**

**Part 4: Add the Amounts for Each Type of Unsecured Claim**

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

		Total Claim	
Total claims from Part 1	6a. Domestic support obligations	6a. \$	<b>1.00</b>
	6b. Taxes and certain other debts you owe the government	6b. \$	<b>0.00</b>

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	6c. <b>Claims for death or personal injury while you were intoxicated</b>	6c. \$ <u>0.00</u>
	6d. <b>Other.</b> Add all other priority unsecured claims. Write that amount here.	6d. \$ <u>0.00</u>
	6e. <b>Total Priority.</b> Add lines 6a through 6d.	6e. \$ <u>1.00</u>
Total claims from Part 2	6f. <b>Student loans</b>	6f. \$ <u>0.00</u>
	6g. <b>Obligations arising out of a separation agreement or divorce that you did not report as priority claims</b>	6g. \$ <u>0.00</u>
	6h. <b>Debts to pension or profit-sharing plans, and other similar debts</b>	6h. \$ <u>0.00</u>
	6i. <b>Other.</b> Add all other nonpriority unsecured claims. Write that amount here.	6i. \$ <u>66,941.96</u>
	6j. <b>Total Nonpriority.</b> Add lines 6f through 6i.	6j. \$ <u>66,941.96</u>